

MEETING MINUTES - <Treatment Workgroup>

Date of Meeting: (10/20/2009)

Minutes Prepared By: Pam Wilson

1. Purpose of Meeting

> Status of Action Plan items

2. Attendance at Meeting *(add rows as necessary)*

Name	Department./Division	E-mail	Phone
Brian Denton	Pfizer Oncology	brian.c.denton@pfizer.com	
Kris Diana	NCIS' CIS	kristine.diana@yale.edu	
Linda Dziobek	Survivor/Advocate	ldziobek@yahoo.com	
Pam Wilson	Partnership Manager	Pamela.wilson@health.ri.gov	

2. Meeting Agenda

> Review presentation for Cancer Committees; Review action plan

3. Meeting Notes, Decisions, Issues

> Reviewed presentation for Cancer Committees. Since meeting, **Pam** has made edits per **Alvaro, Jim, Linda, Brian & Kris'** instructions. Walked through action plan. **Group** suggested to turn over "Develop a train-the-trainer program for educating healthcare professionals about cancer clinical trials and communicating them to cancer patients and families" to **LLS**. **Linda D.** suggested giving a Clinical Trials presentation to Saint Aidan's Senior Center. Regarding the "Lunch and Learns", group needs a list from **Patricia**. **Linda D.** is going to propose idea to W&I Breast Center Oncology Nurses. Regarding setting up clinical trials conference, **Brian** is going to suggest at next Summit Planning meeting as possible theme or educational portion of Summit. Regarding cancer registries' collection of information regarding cancer clinical trials. **Pam** is going to follow-up with John Fulton and Rina Stamas on status. **Kris** reported that establishing an NCI-affiliated RI Community Cancer Oncology Program (CCOP) requires a lot of time and effort. May need to push deadline. **Pam** is going to follow-up with HEALTH webmaster for putting a linke to NCCN guidelines on Partnership website. **Pam** will followup with **Dr. Vezeridis/David Rousseau** to see if he wrote a letter from Partnership recognizing Westerly hospital for gaining ACoS approval. **Pam/Susan** will follow-up with **Carrie Bridges** about CLAS standards.

4. Action Items

Action	Assigned to	Status
<p>Goal #1: Increase awareness, access, and participation in cancer clinical trials by Rhode Island Residents.</p> <p>Objective A: Establish a baseline for clinical trial participation in 2009 and increase that number by at least 10% by 2012</p> <p>Strategy 1: Perform an assessment of the number of people currently enrolled and the capacity for delivery of cancer clinical trials in RI. Also, assess the barriers to awareness access, and participation among cancer patients.</p> <p>Activity #1: Develop and conduct a statewide survey for medical professionals and cancer patients</p> <p>Tasks</p>	<p>Alvaro Tinajero</p>	<p>Survey has been approved by HEALTH IRB. Plan is to present survey to Cancer Committees. Alvaro has asked Dr. Vezeridis to facilitate presentations. Pam and workgroup have developed a powerpoint. Susan is trying to get added to agenda of W&I. Jim is on Agenda for Roger Williams for November 20th at 1:30PM. Pam or another designee will present powerpoint.</p>
Draft survey	Alvaro	Completed
Edit survey	Alvaro	Completed
Pilot test survey	Alvaro	Completed
Adapt per pilot	Alvaro	Completed
Gain sign-on support from oncology organizations	Workgroup	Prepared presentation to Cancer Committees.
Obtain IRB approval from HEALTH to conduct research on human subjects	Alvaro	Completed
Translate to multiple languages	Workgroup	Completed
Obtain contact info for populations to receive the survey	Workgroup	Completed
Distribute to patients and hospitals	Workgroup	Pending
Collect results	Workgroup	Pending
Analyze results	Alvaro	Pending
Share results	Alvaro	Pending

Goal #1: Increase awareness, access, and participation in cancer clinical trials by Rhode Island Residents.

Team Lead

Objective A: Establish a baseline for clinical trial participation in 2009 and increase that number by at least 10% by 2012

Strategy 2: Educate healthcare professionals about cancer clinical trials and overcoming barriers to enrolling patients.

Activity #1: Develop a train-the-trainer program for educating healthcare professionals about cancer clinical trials and communicating about them to cancer patients and families

Tasks

Develop a best practices model for a train-the-trainer program based on a literature review of best practices	Team Lead	Completed
Develop a presentatin based on best practices model		Completed.
Adapt to local physician populations		Completed
Obtain or develop take home materials for attendees		Completed
Identify settings		Ongoing
Book locations		Ongoing
Deliver presentations		Completed a few
Evaluate Effectiveness	Anna	Pending

Goal #1: Increase awareness, access, and participation in cancer clinical trials by Rhode Island Residents.

Kris Diana

Kris Diana, Brian Denton and LLS have existing presentations. Kris suggested turning over this project to LLS. She just gave the presentation for a meeting Gloria Hincapie planned.

Objective A: Establish a baseline for clinical trial participation in 2009 and increase that number by at least 10% by 2012

Strategy 3: Deliver appropriately tailored trainings and programs to key health professional organizations, patient groups, and community based organizations about clinical trials, with emphasis on those reaching ethnic minority and medically underserved audiences. Also incorporate into trainings support for existing telephone and online resources for cancer patients and their families re: state-specific info on available clinical trials in RI from organizations such as the ACS and NCI.

Activity #1: Adapt the LLS presentation on clinical trials to present at different sites around the state

Tasks

Obtain LLS presentation	Kris	Completed
Adapt as needed	Kris	Completed/Ongoing
Identify settings appropriate for target populations	Kris	Ongoing. Linda D. suggested Saint Aidan's Senior Center as a possible location.
Call and book days/times	Kris	Ongoing. Linda inquiring about Saint Aidan's monthly meeting agenda?
Prepare pass out materials to take home	Kris	Ready made materials from LLS
Deliver Presentations	Kris	Kris has presented to a few groups so far: Cumberland Senior Center.

Goal #1: Increase awareness, access, and participation in cancer clinical trials by Rhode Island Residents.

Patricia

May need to assign to another as Patricia's duties have changed at the hospital. Workgroup needs to obtain the list from her.

Objective A: Establish a baseline for clinical trial participation in 2009 and increase that number by at least 10% by 2012

Strategy 3: Deliver appropriately tailored trainings and programs to key health professional organizations, patient groups, and community based organizations about clinical trials, with emphasis on those reaching ethnic minority and medically underserved audiences. Also incorporate into trainings support for existing telephone and online resources for cancer patients and their families re: state-specific info on available clinical trials in RI from organizations such as the ACS and NCI.

Activity #2: Put on lunch and learns for nurses

Tasks

Prepare presentation based on resources identified by the workgroup for other activities

Patricia

Identify settings appropriate for oncology nurses

Patricia

Call and book days/times

Patricia

Linda D. going to suggest to W&I Breast Health Center

Prepare pass out materials to take home/office

Patricia

Deliver Presentations

Patricia

Goal #1: Increase awareness, access, and participation in cancer clinical trials by Rhode Island Residents.

Objective A: Establish a baseline for clinical trial participation in 2009 and increase that number by at least 10% by 2012

Strategy 3: Deliver appropriately tailored trainings and programs to key health professional organizations, patient groups, and community based organizations about clinical trials, with emphasis on those reaching ethnic minority and medically underserved audiences. Also incorporate into trainings support for existing telephone and online resources for cancer patients and their families re: state-specific info on available clinical trials in RI from organizations such as the ACS and NCI.

Activity #3: Create a clinical trials "Fact Sheet"

Tasks

Create a planning group	Kris
Identify resources available on clinical trials and clinical trial enrollment	Kris & Patricia
Condense information to a one page summary	Kris & Pat
Copy and distribute widely	Workgroup

Goal #1: Increase awareness, access, and participation in cancer clinical trials by Rhode Island Residents.

Brian

Possible venue would be The Partnership Annual Cancer Summit.

Objective A: Establish a baseline for clinical trial participation in 2009 and increase that number by at least 10% by 2012

Strategy 3: Deliver appropriately tailored trainings and programs to key health professional organizations, patient groups, and community based organizations about clinical trials, with emphasis on those reaching ethnic minority and medically underserved audiences. Also incorporate into trainings support for existing telephone and online resources for cancer patients and their families re: state-specific info on available clinical trials in RI from organizations such as the ACS and NCI.

Activity #4: Set up a clinical trials conference

Tasks

Engage stakeholders by way of a meeting	Brian	Brian to suggest to Summit Planning Committee at November 09 meeting
Raise Funds	Workgroup	
Identify a date and setting for the conference	Brian	
Obtain e-mail or mailing addresses of protocol nurses and oncology nurses	Patricia	
Develop invitation (mail or e-mail)	Patricia	
Send out invitation	Brian/Pat	
Prepare educational piece of conference	TBD	
Prepare resource and pass out materials	Kris	

<p>Goal #1: Increase awareness, access, and participation in cancer clinical trials by Rhode Island Residents.</p>	<p>Brian</p>	<p>Need to check on the status with John Fulton. Pam/Susan will follow-up with John. Also contact Rina Stamas.</p>
<p>Objective A: Establish a baseline for clinical trial participation in 2009 and increase that number by at least 10% by 2012</p>		
<p>Strategy 4: Support the RI Cancer Registry and other appropriate organizations to expand their capacity to collect and report data on participation in cancer clinical trials at RI facilities.</p>		
<p>Activity #1: Start to engage stakeholders regarding cancer registries and how they could be improved</p>		
<p>Tasks</p>		
<p>Identify meeting place</p>	<p>Brian</p>	
<p>Identify heads of cancer registries of the hospitals and HEALTH</p>	<p>Brian</p>	
<p>Invite select individuals through e-mail, mailed invites, or telephone calls</p>	<p>Brian</p>	
<p>Goal #1: Increase awareness, access, and participation in cancer clinical trials by Rhode Island Residents.</p>	<p>Kris</p>	<p>Kris reported that this is a very long process with a lot of steps.</p>
<p>Objective A: Establish a baseline for clinical trial participation in 2009 and increase that number by at least 10% by 2012</p>		
<p>Strategy 5: Develop and establish NCI-affiliated Rhode Island Community Cancer Oncology Program (CCOP) by 2015</p>		
<p>Activity #1: Identify steps that will be necessary to establish an NCI affiliate in RI</p>		
<p>Tasks</p>		
<p>Contact NCI</p>	<p>Kris</p>	<p>Completed</p>
<p>Share findings with Partnership</p>	<p>Kris</p>	<p>Kris reported that this is a very long process with a lot of steps. This strategy will take too much for a one year action plan.</p>

<p>Goal #2: Improve the quality of cancer treatment provided in Rhode Island</p> <p>Objective A: By 2012, providers in RI will follow NCCN treatment guidelines for all cancer patients</p> <p>Strategy 1: Adopt guidelines set forth by the National Comprehensive Cancer Network (NCCN) statewide and identify gaps in utilization and implementation</p> <p>Activity #1: Draft survey template on NCCN guidelines for distribution later</p> <p>Tasks</p>			Brian	Survey has been developed and piloted. Waiting for other surveys before sending out.
Develop assessment tool – survey	Brian	Completed		
Distribute to all oncology related practices	Brian	Pilot done. Waiting for Clinical Trials survey before sending this survey out.		
<p>Goal #2: Improve the quality of cancer treatment provided in Rhode Island</p> <p>Objective A: By 2012, providers in RI will follow NCCN treatment guidelines for all cancer patients</p> <p>Strategy 2: Support professional organizations in efforts to establish best practices through increased awareness and education about the NCCN guidelines</p> <p>Activity #1: Send an electronic update about NCCN guidelines</p> <p>Tasks</p>			Brian	Pending results of NCCN guideline survey
Develop e-update	Brian	Pending results of NCCN guideline survey		
Obtain e-mail for desired target population	Brian	Pending results of NCCN guideline survey		
Distribute electronically	Brian	Pending results of NCCN guideline survey		

Goal #2: Improve the quality of cancer treatment provided in Rhode Island	Brian and Pam	Pam has sent link to HEALTH webmaster. Will follow-up.
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Objective A: By 2012, providers in RI will follow NCCN treatment guidelines for all cancer patients

Strategy 2: Support professional organizations in efforts to establish best practices through increased awareness and education about the NCCN guidelines

Activity #2: Put a link to NCCN guidelines on the Partnership's website

Tasks

Identify NCCN website address	Brian	Completed
Send address to Pam with a request to post on the Partnership website	Brian	Brian sent address to Pam . Pam has sent it to HEALTH webmaster. Pam will follow-up.

Goal #2: Improve the quality of cancer treatment provided in Rhode Island	Dr. Vezeridis	Westerly Hospital was last hospital to gain ACoS approval. Pam will follow-up with Dr. Vezeridis or David Rousseau to see if a letter of congratulations was sent.
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Objective B: By 2010 all hospitals in RI treating cancer patients will be ACoS approved.

Strategy 1: Provide public recognition for any hospital gaining ACoS approval

Activity #2: Send a letter congratulating the hospital on their ACoS approval from The Partnership

Tasks

Draft letter	Dr. Vezeridis	See above
Gain Partnership approval	Dr. Vezeridis	See above
Mail letter	Dr. Vezeridis	See above

Goal #2: Improve the quality of cancer treatment provided in Rhode Island

Dr. Vezeridis

Completed. All RI hospitals are ACoS approved

Objective B: By 2010 all hospitals in RI treating cancer patients will be ACoS approved.

Strategy 2: Assist non-ACoS approved hospitals with the approval process.

Activity #1: Identify which hospitals are non-ACoS approved, and assist with approval

Tasks

Take inventory of non-ACoS approved hospitals in Rhode Island

Dr. Vezeridis

Completed. All RI hospitals are ACoS approved

Goal #2: Improve the quality of cancer treatment provided in Rhode Island

Team Lead

Carrie Bridges' program will update Treatment workgroup on status

Objective C: By 2012 all cancer treatment providers will be in compliance with Culturally and Linguistically Appropriate Services (CLAS)

Strategy 1: Identify and reduce gaps in interpreter services

Activity #1: Meet with Rhode Island CLAS key informant from HEALTH

Tasks

Set up meeting with key informant

Team lead

See above

Goal #2: Improve the quality of cancer treatment provided in Rhode Island

Latino Task Force; Carrie Bridges

Carrie Bridges will update Treatment workgroup.

Objective C: By 2012 all cancer treatment providers will be in compliance with Culturally and Linguistically Appropriate Services (CLAS)

Strategy 2: Assess need and provide training and technical assistance to healthcare professionals, assuring provision of culturally competent care

Activity #1: Give presentations to selected healthcare facilities staff regarding the use of CLAS standards

Tasks

Engage stakeholders – set up meeting

Fall 2009

Define Goals

Determine facilities

Determine how or if tailoring of presentation is needed to original CLAS presentation

Contact facilities

Winter 2009

Coordinate schedules of presenter and facility

Book times

Deliver presentations

Winter 2009

Evaluate effectiveness

Spring 2009

Goal #2: Improve the quality of cancer treatment provided in Rhode Island

Patricia & Brian

This objective has been outlined for completion in 2012.

Objective D: By 2012, all 12 RI hospitals will have a resource room with access to cancer treatment education and information resources in RI

Strategy 1: Establish a resource center in every ACoS approved hospital that includes Internet access and a phone.

Activity #1: Take inventory of existing hospital resource rooms

Tasks

Create an inventory spreadsheet	Patricia	January 2009
Visit all ACoS approved hospitals in the state	Patricia & Brian	Spring 2009
Take inventory using the prefabricated spreadsheet for easy uniform inventory collection	Patricia & Brian	Spring 2009

5. Next Meeting

Date:	12/15/2009	Time:	5:30-7:00PM	Location:	RI Health Center Association
Agenda:	To follow				